

Town of Buena Vista

P.O. Box 2002 Buena Vista CO 81211 Phone: (719)395-8643 Fax: (719)395-8644

SPECIAL EVENTS PERMIT

Required for events with 200 persons or more in attendance

Name of Event:	
Date(s) of Event:T	Time(s) of Event:
Location of Event:	
-	
□□Event will require street closures (indicate stre	eets)
□ Event will use CDOT property (STH 24).	
Description of Event/Scope of Activities (attach i	narrative if appropriate):
e-mail:	
Contact Person:	Phone:
Address:	
Responsible Party for Day of Event:	
Name:	
Email	Mobile Phone Number:
Number of Participants:	Number of Vendors:
Number of Spectators:	<u> </u>
\$50 Application Fee as cash or che	eck is required at the time of submittal.

Vicinity Map/Site Plan
Attach a vicinity map and site plan for each event application.

10wn Properties – See Appendix A
List the Town properties that are proposed to be used by this event:
Will you be requiring assistance from Public Works? 755 Gregg Drive, 719-395-6898
What type of assistance?
(street barricades, posts, poles, cones, etc.)
** Indicate location on the vicinity map and/or site plan.**
Town Streets
List the streets that are proposed to be used to perform the activities of this event:
** Indicate location of all right-of-ways and roadways on the vicinity map and/or site plan.**
Temporary Road Closure- See Appendix B
List the roads that will qualify for a temporary road closure to ensure the health, safety, and welfare of the public or the participants of this event:
** Indicate location of all temporary road closures on the vicinity map and/or site plan.**
Parking/Traffic Flow
Authorized personnel to direct traffic are:
Will you have off-site parking? Yes/No If yes, where is it and how will you be moving people to the event site?
Number of Parking Spaces Provided:
Is parking proposed on Town streets? Yes/No If yes, please indicate which streets
Indicate number of parking spaces and the locations of the following: parking areas, traffic flow, personnel directing traffic, and traffic signage on the site plan.
Law Enforcement
Describe the plan for communications to be used in the event of an emergency (i.e. radio (what channels), cell phones, etc.):
Will your event involve multiple Law Enforcement Agencies? (list):
Do you anticipate utilizing uniform deputy services from the Police Department for ground security or traffic direction?

Will a private security company be used?
How will your security be identified?
Will your event interrupt the normal traffic flow on any roadway?
Is there any possibility that your event could need the services of the Chaffee County Search and Rescue or the Chaffee County Sheriff's Department?
Indicate locations of security personnel on the site plan.
Emergency Medical Care
Describe EMS arrangements/plan:
Indicate routes for EMS and Fire Crew access:
Indicate locations of first aid and emergency services on the site plan.
Water If using Town water, describe water source and method of distribution.
Expected Amount of Use_
** Indicate locations of water stations on the site plan if applicable.**
Sanitation (Restroom Facilities)
Number of Sanitation Facilities Provided (min. 1/50):
Will you be using a Town facility Yes/No
Describe disposal plan:
** Indicate location and number of sanitation facilities on the site plan.**
Vendors
Describe all food services and vendors planned for this event. Attach list if necessary.
Indicate locations of all vendor booths on the site plan. Vendors must obtain a separate business license from the Town Clerk.
Alcohol
Is alcohol service planned for this event? If yes, explain:
Indicate locations of all food service and alcohol booths on the site plan. Liquor Licenses can only be obtained from the Town Clerk.
Animal Control
Will pets/animals be allowed at this event?: If yes, what types of animals:
Types of activities involving animals:
Types of activities involving animals:
Animal Waste. Indicate method of proposed animal waste removal.

Power Describe power required for this event:			
Indic	cate all electrical sources		
Trash	Γrash Collection/Removal		
Numbe	er of trash receptacles to be provided:		
Describ	be trash and recyclable removal plan/schedule:		
Describ	cribe trash and recyclable removal plan/schedule: cribe trash and recyclable removal plan/schedule: cribe plan to remove hot coals and grease: indicate location of all trash and recyling receptacles on the site plan.** lage all signage that is proposed to be used for this event and its purpose. Please attach a diagram ach sign describing the text, size and materials proposed. All traffic signs must meet Town MUTCD standards as stated in above in Section C. of this application. Indicate location of signs on the vicinity map and/or site plan.** NDITIONS OF APPROVAL: Permit Fee – \$50 Insurance (Permit is not valid without appropriate insurance at the time of the event.) – Liability Insurance shall be provided in the amount required by the Town based on the size and type of event proposed. Evidence of insurance shall be provided prior to issuance of any permit. The insurance policy shall name the Town as an insured, and		
** Indi	cate location of all trash and recyling receptacles on the site plan.**		
of each	signage that is proposed to be used for this event and its purpose. Please attach a diagram sign describing the text, size and materials proposed. All traffic signs must meet Town		
	ITIONS OF APPROVAL:		
	Insurance (Permit is not valid without appropriate insurance at the time of the event.) – Liability Insurance shall be provided in the amount required by the Town based on the size and type of event proposed. Evidence of insurance shall be provided prior to		
	event from the owner or manager of each of the properties accessed, crossed or otherwise directly affected by this event. The Town may require Applicant's provision of written evidence of such approvals as a condition precedent to issuance of a Special Event Permit.		

Any changes to your event after the completion of the application must be submitted immediately in writing to the Town Clerk.

Signatu	are:Date:
	FFICE USE ONLY – COPY TO DEPARTMENTS AND REFERRAL AGENCIES FOR OFF AS INDICATED:
	AMBULANCE
	TOWN ENGINEER
	PLANNING
	PUBLIC WORKS
	POLICE DEPARTMENT
	BV FIRE
	TOWN CLERK
	CDOT
	BUILDING INSPECTION (for events that require electrical or gas power)
	PROOF OF INSURANCE
	FEE PAID
	LIQUOR LICENSE
	STREET CLOSURE APPROVED
	OTHERS:

Town Administrator